

Form Number 1

1 STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT

2) SS:

3 COUNTY OF _____) CASE NO. _____

4

5 IN RE THE MARRIAGE OF:

6

7 _____

8 Petitioner,

9

10 V.

11

12 _____

13 Respondent.

14

APPEARANCE

15

16

17 1. Petitioner Party: _____

18

2. Attorney Information: Self-Represented

19

3. Case Type : DR

20

4. Will **NOT** accept FAX service.

21

5. Names of all family members: _____

22

23

_____ (#) child/ren are involved in this matter.

24

6. Are there related cases? Yes ___ No ___ ; Case Number(s): _____

25

26

27

Signature

28

29

Print your name

30

31

Mailing Address

32

33

Town, State and Zip Code

34

35

Telephone number, with area code

Form Number 2

1 STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT

2) SS:

3 COUNTY OF _____) CASE NO. _____

4
5 IN RE THE MARRIAGE OF:

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7 _____
8 Petitioner,

9 and

10
11 _____
12 Respondent.

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14
15 **VERIFIED PETITION FOR DISSOLUTION OF MARRIAGE**
16 **AND REQUEST FOR PROVISIONAL ORDERS**
17

18 The Petitioner, _____, now states:

19
20 1. Petitioner and Respondent were married on _____, and separated on
21 _____.

22
23 2. _____ has been a continuous resident of _____ County
24 for the last 3 months.

25 3. _____ has been a continuous resident of the State of Indiana for the last 6
26 months.

27 4. There are _____ children of the marriage; namely:

28
29 **NAME**

DATE OF BIRTH

30
31 _____
32 _____
33 _____

34
35
36 5. That _____ is fit and proper person to have custody of the minor
37 children.

38
39 6. Debts and property:

40
41 _____ There are no debts / personal property to divide.

42
43 _____ Petitioner wishes the Court to divide the following debts / personal property:

- 44 a. _____
45 b. _____
46 c. _____
47 d. _____

48 7. _____ is not pregnant.

49 8. Neither party is a member of the military.
50 9. This marriage has suffered an irretrievable breakdown and should be dissolved.

51 10. Change of name:
52 _____ Petitioner / Respondent would like her former name of
53 _____ restored to her.
54 _____ Petitioner / Respondent does not want to change her name.

55
56 I request that this Court issue its order dissolving the marriage of the parties, and for all other just and
57 proper relief and until this matter is finalized, I request the following provisional orders:

- 58 _____ Temporary custody of the minor child (ren);
59 _____ Temporary child support for minor child (ren);
60 _____ Temporary parenting time (visitation) for the non-custodial parent;
61 _____ Temporary possession of the marital residence;
62 _____ Temporary division of debts;
63 _____ Temporary division of property;
64 _____
65 _____ Spousal maintenance;
66 _____ Restraining the parties from removing the child(ren) from the state without the permission
67 of the court or all parties;
68 _____ Restraining the parties from transferring, encumbering, concealing, or in any way disposing
69 of any of the property of the part;
70 _____
71 _____ Other: _____.

72
73 I affirm under the penalties of perjury that the foregoing representations are true.
74
75
76
77

78 _____
(sign your name)

79 _____
(print your name)

80 _____
(your street address)

81 _____
(your city, state and zip Code)

82 _____
(telephone number, with area code)

Form Number 4

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT

) SS:

COUNTY OF _____) CASE NO. _____

IN RE THE MARRIAGE OF:

Petitioner,

and

VERIFIED MOTION FOR FEE WAIVER

Respondent.

The Petitioner now states:

- 1. I wish to file this action and I believe that I have a case with merit.
- 2. I cannot pay any of the filing fees or other costs of this action because I do not have sufficient income or resources.

3. I live with _____

4. Our family's income is \$ _____ per month. *(Total from below)*
(Income received each month, before taxes)

Wages (\$ _____ per hour x _____ hours per month)	_____
Unemployment Compensation	_____
AFDC / TANF Benefits	_____
SSI / SSD Benefits	_____
Child Support	_____
Other	_____
	+

	Total = \$ _____

5. We have \$ _____ in the bank.

6. Our expenses total \$ _____ per month: *(Total from below)*
(Expenses spent each month)

Housing (Rent, Contract, or Mortgage)	_____
Utilities (Gas, Electric, Water, Phone, etc.)	_____
Food	_____
Child Care	_____
Medical Bills	_____
Transportation	_____
Insurance (car, medical and/or property)	_____
Child Support	_____
Other (please describe)	_____
	+

	Total = \$ _____

I request that this Court waive all costs of this action and allow me to proceed without the payment of any filing fees or other costs.

I affirm under the penalties of perjury that the foregoing representations are true.

Signature

Print your name

Mailing address

Town, State and Zip Code

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
COUNTY OF _____) CASE NO. _____

IN RE THE MARRIAGE OF:

Petitioner

and

Respondent

ORDER ON FEE WAIVER

The Petitioner has filed a Verified Motion for Fee Waiver, which the Court has read and finds
should be granted.

IT IS THEREFORE ORDERED that Petitioner may file this case:

_____ without the pre-payment of any filing fees, costs, security, bond, or other expenses; or

_____ upon the pre-payment of \$_____ which is a portion of the filing fee set by statute. Such
sum must be paid by the Petitioner to the Clerk within the next 20 days.

The Court will determine whether any or additional costs are to be paid at a provisional or final
hearing in this case.

Date

Judge

_____ Court

Distribution:

Your name

Your spouse's name

Your mailing address

Your spouse's mailing address

Your town, state and zip code

Your spouse's town, state and zip code

Worksheet – Child Support Obligation

Each party shall complete that portion of the worksheet that applies to him or her, sign the form and file it with the court. This worksheet is required in all proceedings establishing or modifying child support.

IN RE:

CASE NO:

FATHER:

MOTHER:

CHILD SUPPORT OBLIGATION WORKSHEET (CSOW)

Children	DOB	Children	DOB
1. WEEKLY GROSS INCOME Subsequent Children Multipliers (Circle .935 .903 .878 .863 .854)		FATHER	MOTHER
A. Child Support (Court Order for Prior Born Child(ren))			
B. Child Support (Legal Duty for Prior Born Child(ren))			
C. Maintenance Paid			
D. WEEKLY ADJUSTED INCOME (WAI) Line 1 minus 1A, 1B, and 1C			
2. PERCENTAGE SHARE OF TOTAL WAI		%	%
3. COMBINED WEEKLY ADJUSTED INCOME (Line 1D)			
4. BASIC CHILD SUPPORT OBLIGATION Apply CWAI to Guideline Schedules			
A. Weekly Work-Related Child Care Expense of each parent			
B. Weekly Premium – Children’s Portion of Health Insurance Only			
5. TOTAL CHILD SUPPORT OBLIGATION (Line 4 plus 4A and 4B)			
6. PARENT’S CHILD SUPPORT OBLIGATION (Line 2 times Line 5)			
7. ADJUSTMENTS			
() Obligation from Post-Secondary Education Worksheet Line J.		+ _____	+ _____
() Payment of work-related child care by each parent. (Same amount as Line 4A)		- _____	- _____
() Child(ren)’s Portion of Weekly Health Insurance Premium \$ _____. (This will be a credit to the payor)		- _____	- _____
() Parenting Time Credit \$ _____.		- _____	- _____
8. RECOMMENDED CHILD SUPPORT OBLIGATION			

EXPLAIN ANY DEVIATION FROM GUIDELINE SCHEDULES IN ORDER/DECREE.

I affirm under penalties for perjury that the foregoing representations are true.

Father: _____

Dated: _____ Mother: _____

UNINSURED HEALTH CARE EXPENSE CALCULATION

- A. Custodial Parent Annual Obligation: (CSOW Line 4) \$ _____ + (PSEW § Two, Line I) \$ _____ = \$ _____ x 52 weeks x .06 = \$ _____.
- B. Balance of Annual Expenses to be Paid: (Line 2) _____ % by Father; _____ % by Mother.

Form Number 6

1 STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT

2) SS:

3 COUNTY OF _____) CASE NO. _____

4
5 IN RE THE MARRIAGE OF:

6
7 _____
8 Petitioner,

9
10 and

11
12 _____
13 Respondent.

14 **TEMPORARY ORDER**

15
16
17 Petitioner appears/does not appear, and Respondent appears/does not appear for provisional
18 hearing on _____, 20___. The court having been duly advised in this matter, now
19 finds the following:

20 _____ Petitioner/Respondent is awarded temporary custody of the minor child(ren);
21 _____ Petitioner/Respondent shall pay temporary child support for the minor child(ren)
22 in the amount of \$ _____ per week, payable through the _____ County
23 Clerk, or by income withholding order if available from the employer, beginning on
24 _____, 20___.

25 _____ Petitioner/Respondent shall be responsible for the first \$ _____ of uninsured
26 medical expenses for the minor child(ren). Thereafter, Petitioner shall be
27 responsible for _____% and Respondent for _____% of uninsured medical
28 expenses for the minor child(ren).

29 _____ Petitioner/Respondent shall have temporary parenting time (visitation) with the
30 minor child(ren) as the parties agree or according to the Indiana Parenting Time
31 (Visitation) guidelines;

32 _____ Petitioner/respondent shall have temporary possession of the marital residence;
33 _____ Petitioner/Respondent shall temporarily maintain medical, dental, and optical
34 insurance as available through employment for the following persons:

35 _____
36 _____
37 _____

38 _____ There shall be a temporary division of debts, as follows:

Form Number 6

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a. Petitioner shall be solely responsible for the following debts:

b. Respondent shall be solely responsible for the following debts:

_____ There shall be a temporary division of property, as follows:

a. Petitioner shall have sole possession of the following items of property:

b. Respondent shall have sole possession of the following items of property:

_____ There shall be a temporary division of motor vehicles, as follows:

a. Petitioner shall have temporary possession of the following vehicles:

(Vehicle #1, Make, Model, and Year)

(Vehicle #2, Make, Model and Year)

b. Respondent shall have temporary possession of the following vehicles:

(Vehicle #1, Make, Model, and Year)

(Vehicle #2, Make, Model and Year)

_____ There shall be a temporary restraining order in effect during these proceedings:

_____ Restraining the parties from removing the child(ren) from the state
without the permission of the court or all parties;

_____ Restraining the parties from transferring, encumbering, or
concealing, or in any way disposing of any of the property of the

Form Number 6

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parties;
Other:

ALL OF WHICH IS SO ORDERED THIS _____ DAY OF _____, 20____.

Date

Judge
_____ Court

Distribution:

(print your name)

(your street address)

(your city, state, zip code)

(print your spouse's name)

(spouse's street address)

(spouse's city, state, zip, code)

Form Number 7

1 STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
2) SS:
3 COUNTY OF _____) CASE NO. _____
4

5 IN RE THE MARRIAGE OF:
6
7

8 _____
9 Petitioner,
10

11 and
12

13 _____
14 Respondent.
15

16 **VERIFIED WAIVER OF FINAL HEARING**
17

18 Come now Petitioner and Respondent pursuant to Ind. Code 31-1-11.5-8 and submit their
19 Verified Waiver of Final Hearing. In support of this Waiver, the parties state that:
20

- 21 1. More than sixty (60) days have elapsed since the filing of Petitioner's Verified Petition for
22 Dissolution of Marriage;
- 23
- 24 2. Both parties request the Court to approve their Settlement Agreement and Decree of Dissolution
25 of Marriage.
- 26
- 27 3. Both parties voluntarily waive the opportunity to hold a final hearing on contested issues.
28

29 I affirm under the penalties of perjury that the foregoing representations are true.
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31

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33 _____
34 (sign your name)

_____ (spouse's signature)
35

36 _____
37 (print your name)

_____ (print your spouse's name)
38

39 _____
40 (your street address)

_____ (spouse's street address)
41

42 _____
43 (your city, state, zip code)

_____ (your spouse's city, state, zip code)
44

45 _____
46 (your telephone number)

_____ (spouse's telephone number)

Form Number 8

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT

) SS:

COUNTY OF _____) CASE NO. _____

IN RE THE MARRIAGE OF:

Petitioner,

and

Respondent.

SETTLEMENT AGREEMENT AND DECREE OF DISSOLUTION OF MARRIAGE

The parties having submitted their Settlement Agreement and the court having seen and considered the Verified Petition for Dissolution of Marriage and Verified Waiver of Final Hearing submitted by the parties, now approves the following agreement:

1. The parties were married on _____, and separated on _____.
2. _____ has been a continuous resident of _____ County for the last three months, and the State of Indiana for the last six months prior to the filing of the Verified Petition for Dissolution of Marriage.
3. _____ is not pregnant.
4. Neither party is a member of the military.
5. There were children born of this marriage; namely;

Name

Date of birth

_____	_____
_____	_____
_____	_____

6. The parties agree and state that it is in the best interest of the child(ren) that:

_____ Petitioner shall have sole physical and legal custody of the child(ren).

_____ Respondent shall have sole physical and legal custody of the child(ren).

_____ Petitioner shall have sole physical custody and the parties shall have joint legal custody of the child(ren)

_____ Respondent shall have sole physical custody and the parties shall have joint legal custody of the child(ren).

_____ Other:

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7. The parties have agreed on the following Parenting Time (Visitation) order:

_____ Petitioner shall have reasonable visitation with the minor child(ren) as the parties agree or according to the Indiana Parenting Time guidelines.

_____ Respondent shall have reasonable visitation with the minor child(ren) as the parties agree or according to the Indiana Parenting Time guidelines.

_____ Other:

8. _____ will pay child support in the amount of \$_____ per week, as shown by the attached child support worksheet, through the County Clerk's office, or by income withholding order if available from the employer, beginning on the first Friday following the date of the decree. Said date is _____.
_____ will be responsible for the first \$_____ of uninsured medical expenses for the minor child(ren). Thereafter, Petitioner shall be responsible for _____% of uninsured medical expenses, and Respondent shall be responsible for _____% of uninsured medical expenses for the minor child(ren).

9. The parties have agreed on the following provisions for health insurance maintenance:

_____ Petitioner shall maintain medical dental, and optical insurance as available through employment for the following persons:

_____ Respondent shall maintain medical, dental, and optical insurance as available through employment for the following persons:

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10. The parties have agreed on the following arrangement for claiming the tax credits, exemptions, and deductions for the minor child(ren):

_____ Petitioner shall be entitled to claim the minor child(ren) for federal, state, and local income tax purposes on an annual basis; Respondent shall sign all necessary documents that will entitle Petitioner to do so.

_____ Respondent shall be entitled to claim the minor child(ren) for federal, state, and local income tax purposes on an annual basis; Petitioner shall sign all necessary documents that will entitle Respondent to do so.

_____ Petitioner and Respondent shall each be entitled to claim the minor child(ren) for federal, state, and local income tax purposes in alternating years; Petitioner shall be entitled to claim the minor child(ren) in the year _____, and every even/odd year thereafter; Respondent shall be entitled to claim the minor child(ren) in the year _____, and every even/odd year thereafter.

11. The parties have agreed on the following debt division:

_____ The parties already have divided their debts.

_____ Petitioner will be solely responsible for and shall hold Respondent harmless from, the following debts:

Name of Creditor *Amount of Debt*

_____ Respondent will be solely responsible for, and shall hold Petitioner harmless from the following debts:

Name of Creditor *Amount of Debt*

12. The parties have agreed on the following vehicle division:

_____ There are no vehicles to divide.

_____ Petitioner will have sole possession of the following vehicles, and Respondent shall execute all documents necessary to transfer title of said vehicles within thirty (30) days of the date of this Order:

159
160
161 _____
162 *Vehicle #1, Make, Model, and Year*
163

164 _____
165 *Vehicle #2, Make, Model, and Year*
166

167 _____ Respondent will have sole possession of the following vehicles, and
168 Petitioner shall execute all documents necessary to transfer title of said
169 vehicles within thirty (30) days of the date of this Order:
170

171 _____
172 *Vehicle #1, Make, Model, and Year*
173

174 _____
175 *Vehicle #2, Make, Model, and Year*
176

177 13. The parties have agreed on the following property division:
178

179 _____ The parties already have divided all items of property.
180

181 _____ Petitioner will have sole possession of the following items of property:
182

183 _____
184 _____
185 _____
186 _____
187 _____
188 _____

189 _____ Respondent will have sole possession of the following items of property:
190

191 _____
192 _____
193 _____
194 _____
195 _____
196

197 14. The marriage has suffered an irretrievable breakdown and should be dissolved.
198

199 15. Change of names:
200

201 _____ Petitioner/Respondent would like her maiden name or previous married
202 name of _____ restored to her.
203

204 _____ Petitioner/Respondent does not want to change her name.
205

206 The parties have disclosed all relevant documents and exchanged all information on value of
207 property, pensions, real estate, and other assets and debts. The parties agree that this division of
208 property is/is not an approximate equal division of the assets and debts. The parties agree that if
209 this division is not a nearly equal division, that the deviation from the presumptive equal division
210 should be accepted by the Court because it is the parties' agreement and neither party has been

Form Number 8

211 forced or threatened to accept this agreement.

212
213 I affirm under the penalties of perjury that the foregoing representations are true.

214 _____
215 (Sign your name)

216 _____
217 (Print your name)

218 STATE OF INDIANA)
219) SS:
220 COUNTY OF _____)

221
222 Before me, _____, a notary public in and for _____ county, State of Indiana,
223 personally appeared _____, and he being first duly sworn upon his/her oath, says that
224 the facts alleged in the foregoing instrument are true.

225 Date _____
226 _____ NOTARY PUBLIC

227 MY COMMISSION EXPIRES:
228 _____

229 _____
230

231 _____
232 (Spouse's signature)

233 _____
234 (Prints your spouse's name)

235
236 STATE OF INDIANA)
237) SS:
238 COUNTY OF _____)

239
240 Before me, _____, a notary public in and for _____ county, State of Indiana,
241 personally appeared _____, and he being first duly sworn upon his/her oath, says that
242 the facts alleged in the foregoing instrument are true.

243 Date _____
244 _____ NOTARY PUBLIC

245 MY COMMISSION EXPIRES:
246 _____

247 _____
248

249 **IT IS THEREFORE ORDERED** by the Court that the parties' marriage is hereby dissolved, and
250 the terms of their agreement as set out above shall be incorporated into this Order.

251
252 _____
253 Date Judge _____
254 _____ Court

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Distribution:

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(print your name)

(print your spouse's name)

(your street address)

(spouse's street address)

(your city, state, zip code)

(your spouse's city, state, zip code)

(your telephone number)

(spouse's telephone number)

Form Number 9

1 STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
2) SS:
3 COUNTY OF _____) CASE NO. _____
4

5 IN RE THE MARRIAGE OF:
6
7

8 _____
9 Petitioner,
10

11 and
12

13 _____
14 Respondent.
15

MOTION FOR FINAL HEARING

16
17 The Petitioner now states that sixty (60) days have passed since the filing of the Verified Petition
18 for Dissolution of Marriage and requests that this matter be set for Final Hearing on the next available
19 hearing date, allowing fifteen (15) minutes for the hearing. [If you need more than 15 minutes, please
20 advise the Court when you file this Motion.]
21

22 _____
Signature of Petitioner

23 _____
24 Print your name

25 _____
26 Mailing address

27 _____
28 Town, State and Zip Code

29 _____
30 Telephone number, with area code
31

CERTIFICATE OF SERVICE

32
33 I certify that I have served a copy of the foregoing on the Respondent by first class mail this
34 _____ day of _____, 2____.

35 _____
36 Signature
37
38

Form Number 10

1 STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
2) SS:
3 COUNTY OF _____) CASE NO. _____
4

5 IN RE THE MARRIAGE OF:
6
7

8 _____
9 Petitioner,
10

11 and
12

13 _____
14 Respondent.
15

16 **NOTICE OF FINAL HEARING**

17 The Petitioner has filed a Motion For Final Hearing, which the Court has considered and now
18 grants.

19 **IT IS THEREFORE ORDERED** that the final hearing for this matter shall be held on
20 _____ at _____ AM/PM. [The Court allows 15 minutes for the hearing.] [The Court
21 allows _____ for the hearing.] The Parties may present evidence on their behalf. Failure to
22 appear may result in matters being decided in your absence.
23

24 So ordered this _____ day of _____, 2____.

25 _____
26 Judge
27 _____

Court

28 Distribution:
29

30 _____
31 Your name

30 _____
Your spouse's name

31 _____
32 Your mailing address

31 _____
32 Your spouse's mailing address

33 _____
34 Your town, state and zip code

33 _____
34 Your spouse's town, state and zip code

Form Number 11

1 STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
2) SS:
3 COUNTY OF _____) CASE NO. _____
4

5 IN RE THE MARRIAGE OF:
6
7

8 _____
9 Petitioner,
10

11 and
12

13 _____
14 Respondent.
15

16 **DECREE OF DISSOLUTION OF MARRIAGE**
17

18 The Court having reviewed the Verified Petition for Dissolution of Marriage and having held a
19 final hearing in this matter, now finds the following:

- 20 1. The parties were married on _____, and separated on
21 _____.
- 22 2. _____ has been a continuous resident of _____ County
23 for the last three months, and the State of Indiana for the last six months prior to the filing of the
24 Verified for Dissolution of Marriage.
- 25 3. _____ is not pregnant.
- 26 4. Neither party is a member of the military.
- 27 5. There were children born of this marriage; namely;

28 Name

Date of Birth

29 _____
30 _____
31 _____
32 _____

- 33
- 34 6. It is in the best interests of the child(ren) that custody of the minor child(ren) be as follows:

35 _____ Petitioner shall have sole physical and legal custody of the child(ren).

36 _____ Respondent shall have sole physical and legal custody of the child(ren).

37 _____ Petitioner shall have sole physical custody and the parties shall have joint legal
38 custody of the child(ren).

39 _____ Respondent shall have sole physical custody and the parties shall have joint legal

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custody of the child(ren).

Other: *(please describe in detail)*

7. Parenting Time (Visitation) with the minor child(ren) shall be as follows:

Petitioner shall have reasonable parenting time (visitation) with the minor child(ren) as the parties agree or according to the Indiana Parenting Time (visitation) guidelines.

Respondent shall have reasonable parenting time (visitation) with the minor child(ren) as the parties agree or according to the Indiana Parenting Time (visitation) guidelines.

Other: We have agreed to a different parenting time (visitation) that does **NOT** follow the Indiana Parenting Time (Visitation) Guidelines. *(please describe in detail)*

8. _____ will pay child support in the amount of \$_____ per week, as shown by the attached child support worksheet, through the County Clerk's office, or by income withholding order if available from the employer, beginning on the first Friday following the date of this decree. Said date is _____. The custodial parent, _____, will be responsible for the first \$_____ of uninsured medical expenses for the minor child(ren). Thereafter, Petitioner shall be responsible for _____% of uninsured medical expenses, and Respondent shall be responsible for _____% of uninsured medical expenses for the minor child(ren). _____ will be responsible to pay the Administrative Fee that the Clerk charges annually.

9. The parties have agreed on the following provisions for health insurance maintenance:

Petitioner shall maintain medical, dental, and optical insurance as available through employment for the following persons:

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73 _____
74 _____
75 _____

76
77 _____ Respondent shall maintain medical, dental, and optical insurance as available
78 through employment for the following persons:

79 _____
80 _____
81 _____
82 _____

83
84 10. The parties have agreed on the following arrangement for claiming tax credits, exemptions, and
85 deductions for the minor child(ren):

86 _____ Petitioner shall be entitled to claim the minor child(ren) for federal, state, and local
87 income tax purposes on an annual basis; Respondent shall sign all necessary
88 documents that will entitle Petitioner to do so.

89 _____ Respondent shall be shall be entitled to claim the minor child(ren) for federal, state,
90 and local income tax purposes on an annual basis; Petitioner shall sign all necessary
91 documents that will entitle Respondent to do so.

92 _____ Petitioner and Respondent shall each be entitled to claim the minor child(ren) for
93 federal, state, and local income tax purposes in alternating years; Petitioner shall be
94 entitled to claim the minor child(ren) in the year _____, and every even/odd year
95 thereafter; Respondent shall be entitled to claim the minor child(ren) in the year
96 _____, and every even/odd year thereafter. Parties shall sign all necessary
97 paperwork to allow enforcement of such Order.

98 11. The marital debts shall be divided as follows:

99 _____ The parties already have divided their debts.

100 _____ Petitioner will be solely responsible for, and shall hold Respondent harmless from,
101 the following debts:

<u>Name of Creditor</u>	<u>Amount of Debt</u>
_____	_____
_____	_____
_____	_____

105

Form Number 11

106 _____ Respondent will be solely responsible for, and shall hold Petitioner harmless from,
107 the following debts:

	<u>Name of Creditor</u>	<u>Amount of Debt</u>
109	_____	_____
110	_____	_____
111	_____	_____

112 12. The parties have agreed on the following vehicle division:

113 _____ There are no vehicles to divide.

114 _____ Petitioner will have sole possession of the following vehicle(s), and Respondent
115 shall execute all documents necessary to transfer title of these vehicle(s) within
116 thirty (30) days of the date of this Order:

117 _____
118 *(Vehicle #1, Make, Model, and Year)*

119 _____
120 *(Vehicle #2, Make, Model, And Year)*

121 _____ Respondent will have sole possession of the following vehicle(s), and Petitioner
122 shall execute all documents necessary to transfer title of these vehicle(s) within
123 thirty (30) days of the date of this Order:

124 _____
125 *(Vehicle #1, Make, Model, and Year)*

126 _____
127 *(Vehicle #2, Make, Model, And Year)*

128 13. The marital property shall be divided as follows:

129 _____ The parties already have divided all items of property.

130 _____ Petitioner will have sole possession of the following items of property:

131 _____
132 _____
133 _____

134 _____ Respondent will have sole possession of the following items of property:

135 _____
136 _____
137 _____

138 14. This marriage has suffered an irretrievable breakdown and should be dissolved.

Form Number 11

139 15. Change of names:
140 _____ Petitioner/Respondent would like her maiden or previous married name of
141 _____ restored to her.
142 _____ Petitioner/ Respondent does not want to change her name.

143
144 **IT IS THEREFORE ORDERED** by the Court that the parties' marriage is hereby dissolved.

145 _____
146 Date Judge
147 _____ Court

148 Distribution:

149 _____	_____
150 (Print Your name)	(Print your spouse's name)
151 _____	_____
152 (Your street address)	(Your spouse's street address)
153 _____	_____
154 (Your city, state and zip code)	(Your spouse's city, state, zip code)
155 _____	_____
156 (Your telephone Number)	(Your spouse's telephone Number)
157 _____	_____

Form Number 12

1 STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
2) SS:
3 COUNTY OF _____) CASE NO. _____
4
5

6 IN RE THE MARRIAGE OF:
7
8

9 _____
10 Petitioner,
11 and
12 _____
13 Respondent.

13 **SUMMONS**
14 [For Dissolution of Marriage Cases Only]

15 TO RESPONDENT: _____
16 _____
17 _____
18 _____
19 _____
20 _____

- 21 1. You are hereby notified that you have been sued by the Petitioner for Dissolution of Marriage in
22 the Court indicated above.
- 23 2. If this summons is accompanied by an Notice to Appear, you should appear in Court on the date
24 and time stated in the Order to Appear. If you do not appear, evidence may be heard in your
25 absence and a determination made by the Court. If a Temporary Restraining Order is attached, it is
26 effective immediately upon your receipt or knowledge of the Order.
- 27 3. If you wish to retain an attorney to represent you in this matter, it is advisable to do so before the
28 date stated in the Notice to Appear.
- 29 4. If you take no action in this case after the receipt of this summons, the Court can grant a
30 Dissolution of Marriage or make a determination regarding any of the following: paternity, child
31 custody, child support, maintenance, parenting time, property division (real or personal) and any
32 other distribution of assets and debts.

33 Dated: _____
34 _____
35 Clerk, _____ County

36 The following manner of Service of Summons is hereby designated:

- 36 _____ Registered / Certified Mail to be sent by the Clerk .
37 _____ Service by Sheriff on Individual at address shown above
38 _____ Service by Sheriff at place of employment, (**name and address of spouse's employer**):
39 _____
40 _____

SHERIFF'S RETURN OF SERVICE OF SUMMONS

I hereby certify that I have served this summons on the ____ day of _____, 2____:

(1) By delivering a copy of the Summons and a copy of the complaint to the Respondent identified on the 1st page of Summons.

(2) By leaving a copy of the Summons and a copy of the complaint at _____, which is the dwelling place or usual place of abode of and by mailing a copy of the Summons to the Respondent at the above address.

(3) Other Service or Remarks: _____

Sheriff's Costs

Sheriff

By: _____

Deputy

CLERK'S CERTIFICATE OF MAILING

I hereby certify that on the ____ day of _____, 2____, I mailed a copy of this Summons and a copy of the Complaint to the Respondent identified on the 1st page of the Summons by _____ mail, requesting a return receipt, at the address provided by the Petitioner.

Clerk, _____ County

Dated: _____, 2____

By: _____

Deputy

RETURN ON SERVICE OF SUMMONS BY MAIL

I hereby certify that the attached receipt was received by me showing that the Summons and a copy of the Complaint mailed to the Respondent identified on the 1st page of this Summons was accepted by the Respondent on the ____ day of _____, 2____.

I hereby certify that the attached return receipt was received by me showing that the Summons and a copy of the Complaint was returned not accepted on the ____ day of _____, 2____.

I hereby certify that the attached return receipt was received by me showing that the Summons and a copy of the Complaint mailed to the Respondent identified on the 1st page of this Summons was accepted by _____ on behalf of the Respondent on the ____ day of _____, 2____.

Clerk, _____ County

By: _____

Deputy